ARIZONA DEPARTMENT OF HEALTH SERVICES DIVISION OF BEHAVIORAL HEALTH SERVICES DIVISION DOCUMENT REVISION NOTICE

The Arizona Department of Health Services/Division of Behavioral Health Services has revised the below referenced document(s), indicated by **BOLD** print and the symbol **[X]**. The attached memorandum includes a detailed description of the changes impacting the selected document(s). The revised document(s) will be posted to the ADHS/DBHS website on or around April 1, 2008. Please direct any questions regarding this Division document revision notice to Janice Hippe at (602) 364-4655 or via electronic mail at hippej@azdhs.gov.

DIVISION DOCUMENT	ADHS/DBHS PROVIDER MANUAL	ADHS/DBHS POLICY AND PROCEDURES MANUAL	ADHS/DBHS PROGRAM SUPPORT PROCEDURES MANUAL	ADHS/DBHS COVERED BEHAVIORAL HEALTH SERVICES GUIDE
REVISION [X]				[X]
DIVISION DOCUMENT	CLIENT INFORMATION SYSTEM (CIS) FILE LAYOUT AND SPECIFICATIONS MANUAL	OFFICE OF GRIEVANCE AND APPEALS DATABASE MANUAL	ADHS ACCOUNTING AND AUDITING PROCEDURES MANUAL	FINANCIAL REPORTING GUIDE FOR REGIONAL BEHAVIORAL HEALTH AUTHORITIES
REVISION [X]				
DIVISION DOCUMENT	ADHS/DBHS QUALITY MANAGEMENT/UTILIZATION MANAGEMENT PLAN	ADHS/DBHS PREVENTION FRAMEWORK FOR BEHAVIORAL HEALTH	AHCCCS MEDICAL POLICY MANUAL-CHAPTERS 900 AND 1000	ADHS/DBHS STRATEGIC PLAN
REVISION [X]				
DIVISION DOCUMENT	ADHS/DBHS CULTURAL COMPETENCE PLAN	ADHS/DBHS CLINICAL GUIDANCE DOCUMENTS	TITLE XIX CHILDREN'S BEHAVIORAL HEALTH ANNUAL ACTION PLAN	
REVISION [X]				

Arizona Department of Health Services Division of Behavioral Health Services Memorandum

Date: February 29, 2008

To: Stakeholders

From: Margaret Russell, Bureau Chief of Policy

Re: Final Changes to the ADHS/DBHS Covered Behavioral Health Services Guide

The following is a summary of the final revisions to the ADHS/DBHS Covered Behavioral Health Services Guide, Version 6.3. The final revisions will be posted to the ADHS/DBHS website on or around April 1, 2008. Please note that the changes described in this Memorandum represent the **FINAL** changes that are to be implemented by Tribal and Regional Behavioral Health Authorities and their contracted behavioral health providers.

Due to the numerous changes to the ADHS/DBHS Covered Behavioral Health Services Guide, Version 6.3, including the Table of Contents, it is suggested that the entire guide be replaced.

Section I.A Purpose

 Changed language in last paragraph to read: "...Written requests should be forwarded to the ADHS/DBHS Policy Office. The final disposition of any request for change to the ADHS/DBHS Behavioral Health Covered Services Guide will be communicated back to the requestor."...

Section I.B Organizing Principles

1. Updated language to incorporate UB04 manual/claim form and delete UB92 manual/claim form.

Section I.F.1.a.(4). UB92 Revenue Codes

1. Changed title to "UB04 Revenue Codes". Change reference in the single paragraph of the "UB92 Manual" to "UB04 Manual".

Section I.F.2.a. AHCCCS Provider Billing Types

- 1. Corrected description of provider type 77 to "Behavioral Health Outpatient Clinic" throughout guide.
- 2. Corrected description of provider type B7 to "Crisis Services Provider" throughout guide.

Section I.F.6. Diagnosis Codes

1. Changed paragraph 5 to read: "Inpatient UB04 encounters/claims for revenue codes submitted by inpatient provider types..."

Section I.F.7.b. Core Provider Travel Billing Limitations

- 1. Added language: "Providers may not bill for travel under 25 miles for missed appointments."
- 2. Deleted language allowing providers to bill for total travel for missed appointments.

Section II.A.1. Behavioral Health Counseling and Therapy

1. H0004 HQ (Group Behavioral Health Counseling and Therapy). Added language to footnote 3 clarifying "specialized" counseling may be provided in the Level 1 facility or other places of services as listed for this code.

Section II.A.2. Assessment, Evaluation and Screening Services

1. H0031-Mental Health assessment-by Non-Physician. Removed "Billing Unit: 30 minutes.

Section II.A.3. Other Professional

1. Added Place of Service 56 (Psychiatric Residential Treatment Center) to H0046 (Mental Health Services (NOS) –formerly Traditional Healing Services) as this service was meant to be available in both Substance Abuse and Psychiatric Residential Treatment Centers.

Section II.B.1. Skills Training and Development

1. Added language to billing limitation #4- "Psychosocial Rehabilitation cannot be billed on the same day, with certain exceptions. (See footnote 4 on page 91)"

Section II.D.1. Case Management

1. Deleted case management codes 99361, 99362, 99371, 99372 and 99373 as they are no longer valid.

Section II.D.2. Personal Care Services

1. Added language to billing limitation #3- "Personal care services provided in an OBHL licensed inpatient, residential or day program setting are included in the rate for those settings and cannot be billed separately, with certain exceptions. (See footnote 4 on page 91)"

Section II.D.3. Home Care Training Family (Family Support)

- 1. Added language to billing limitation #3- "...and cannot be billed separately, with certain exceptions. (See footnote 5 on page 128)".
- 2. Added language to billing limitation #3- "...by the behavioral health therapeutic home, with certain exceptions. (See footnote 4 on page 91)".

Section II.D.4. Self Help/Peer Services

1. Added language to billing limitation #3- "...and cannot be billed separately, with certain exceptions. (See footnote 4 on page 91)".

Section II.D.5. Home Care Training to Home Care Client

1. General Definition, changed "foster parent/family" to "behavioral health therapeutic home".

- 2. Provider of Services to Children, changed "foster care families" to "behavioral health therapeutic homes". Please note that the rule cited in bullet #1 has not changed the term "professional foster care home" in R6-5-5850 yet and is still valid.
- 3. Provider of Services to Adults, changed "foster care families" to "behavioral health therapeutic homes". Please note that the rule cited in bullet #1 has not changed the term "Adult Therapeutic Foster Home" in R9-20-1501 yet and is still valid.
- 4. Provider of Services to Adults, item c, changed "therapeutic foster care home" to "behavioral health therapeutic home provider".
- 5. Billing limitations #1, changed "therapeutic foster care employee" to "behavioral health therapeutic home provider".
- 6. Billing limitations #5, changed "therapeutic foster care family" to "behavioral health therapeutic home provider".
- 7. Billing limitations #6, changed "therapeutic foster care family" to "behavioral health therapeutic home provider".

Section II.D.8. sign Language or Oral Interpretive Services

- 1. Added language to the "Service Standard/Provider Qualifications" stating "... to Title XIX/XXI eligible persons, persons determined to have a Serious Mental Illness and applicants...".
- 2. Added clarifying language to billing limitations stating these services are not Title XIX/XXI reimbursable.

Section II.F. Inpatient Services

1. Under "Revenue Codes" changed "UB92 claim form" to "UB04 claim form".

Section II.F.1 Hospital

1. Removed the word "time" from billing limitation #1.

Section II.F.2. Subacute Facility

Removed the word "time" from billing limitation #3.

Section II.F.3. Residential Treatment Center

- 1. Added Provider Type Level I Psychiatric Hospital (IMD) (71) to revenue codes 0183 and 0189.
- 2. Removed the word "time" from billing limitation #5.

Appendix B-2, ADHS/DBHS Allowable Procedure Code Matrix:

- 1. Changed provider description on provider type 77 to match AHCCCS description
- 2. Added provider type 71 to revenue codes 0183 and 0189
- 3. Changed units and rate on the following codes: 90847, 96101, 96102, 96119, H0031, 96103, 96111, 96116, 96118
- Corrected erroneous dropping of T2049 TN
- 5. Removed deleted CPT codes 99371, 99372, 99373, 99361 and 99362.

REPLACE APPENDIX B-2

Appendix B-5, Billing Limitations Matrix:

NO CHANGES

Summary of Replacement Appendices and Page Numbers

Section	Replace
Covered Services Guide	Entire Guide due to changes and pagination
Appendix B-2	Entire Appendix
Appendix B-5	No changes

N:\Policy Office\Covered Services Guide\CSG Change Memos\2008\final changes 2/29/08.doc